



Atty. Dkt. No. 016907-1044  
2852

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JUL 20 2001

Applicant: Tokihiko ISE

Title: IMAGE FORMING APPARATUS

Appl. No.: 09/506,327

Filing Date: 02/18/2000

Examiner: Q. Grainger

Art Unit: 2852

**AMENDMENT TRANSMITTAL**

Commissioner for Patents  
Washington, D.C. 20231

Sir:

Transmitted herewith is Amendment A in the above-identified application.

- [ ] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a Small Entity statement previously submitted.
- [ ] Small Entity statement is enclosed.
- [ X ] The fee required for additional claims is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	22	22	0	x \$18.00 =	\$0.00
Independents:	4	3	1	x \$80.00 =	\$80.00
First presentation of any Multiple Dependent Claims:				+ \$270.00 =	\$0.00
				CLAIMS FEE TOTAL: =	\$80.00

- [ ] Applicant hereby petitions for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

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Extension for response filed within the first month:	\$110.00	\$0.00
Extension for response filed within the second month:	\$390.00	\$0.00
Extension for response filed within the third month:	\$890.00	\$0.00
Extension for response filed within the fourth month:	\$1,390.00	\$0.00
Extension for response filed within the fifth month:	\$1,890.00	\$0.00
EXTENSION FEE TOTAL:		\$0.00
CLAIMS AND EXTENSION FEE TOTAL:		\$80.00
[ ] Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$80.00

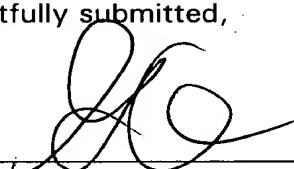
- [ ] Please charge Deposit Account No. 19-0741 in the amount of \$80.00 . A duplicate copy of this transmittal is enclosed.
- [ X ] A check in the amount of \$80.00 is enclosed.
- [ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 7/18/01

By \_\_\_\_\_

  
Glenn Law  
Attorney for Applicant  
Registration No. 34,371

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